PTO/SB/22 (07-09)
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U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection		Docket Number (Optional)		
PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2009 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		17772/004001		
For WINDSCREEN WIPER SYSTEM FOR VEHIC	CLES AND A FIXIN	NG ELEMENT FOR	SUCH A S	YSTEM
Art Unit 3727		Examiner	G. K. Gr	aham
This is a request under the provisions of 37 CFR 1.136(application.	a) to extend the per	iod for filing a reply in	the above	identified
The requested extension and fee are as follows (check	time period desired	and enter the approp	riate fee be	low):
	Fee	Small Entity Fer	€	
X One month (37 CFR 1.17(a)(1))	\$130	\$65	\$_	130.00
Two months (37 CFR 1.17(a)(2))	\$490	\$245	\$	
Three months (37 CFR 1.17(a)(3))	\$1110	\$555	\$_	
Four months (37 CFR 1.17(a)(4))	\$1730	\$865	\$_	
Five months (37 CFR 1.17(a)(5))	\$2350	\$1175	\$_	
Applicant claims small entity status. See 37 0	CFR 1.27.			
A check in the amount of the fee is enclosed.				
X Payment by credit card.				
The Director has already been authorized to	charge fees in this	application to a Dep	osit Accou	nt.
X The Director is hereby authorized to charge a				
Deposit Account Number 50-0591		,,,		
WARNING: information on this form may become Provide credit card information and authorization	public. Credit card Ir on PTO-2038.	nformation should not	be included	on this form.
I am the applicant/inventor.				
assignee of record of the entire Statement under 37 CFR			6).	
x attorney or agent of record. Re	gistration Number	33,986		
attorney or agent under 37 CFF	₹ 1.34.			
Registration number if acting u	inder 37 CFR 1.34			
Seemal Notite	July 20, 2011			
Signature SQ 2:35		Date		
-AJonathan P. Osha		(713) 228-8600		
typed or printed name		Telep	hone Numb	per
NOTE: Signatures of all the inventors or assignees of record of the than one signature is required, see below.	entire interest or their re	presentative(s) are required	. Submit multip	le forms if more
Total of 1 forms are sub-	mitted.			